

House File 2460

H-8240

1 Amend House File 2460 as follows:

2 1. By striking page 105, line 4, through page 109,
3 line 19, and inserting:

4 <DIVISION ____

5 HOSPITAL DISCHARGE PLANNING

6 Sec. _____. HOSPITAL DISCHARGE PLANNING. A hospital
7 licensed pursuant to chapter 135B shall comply with
8 the conditions for participation relating to discharge
9 planning specified in 42 C.F.R. §482.43 as follows:

10 The hospital must have in effect a discharge
11 planning process that applies to all patients. The
12 hospital's policies and procedures must be specified in
13 writing, and include or incorporate as standards the
14 following:

15 1. Standard: Identification of patients in need
16 of discharge planning. The hospital must identify at
17 an early stage of hospitalization all patients who
18 are likely to suffer adverse health consequences upon
19 discharge if there is no adequate discharge planning.

20 2. Standard: Discharge planning evaluation.

21 a. The hospital must provide a discharge planning
22 evaluation to the patients identified in subsection 1,
23 and to other patients upon the patient's request, the
24 request of a person acting on the patient's behalf, or
25 the request of the physician.

26 b. A registered nurse, social worker, or other
27 appropriately qualified personnel must develop, or
28 supervise the development of, the evaluation.

29 c. The discharge planning evaluation must include
30 an evaluation of the likelihood of a patient needing
31 post-hospital services and of the availability of the
32 services.

33 d. The discharge planning evaluation must include
34 an evaluation of the likelihood of a patient's capacity
35 for self-care or of the possibility of the patient

1 being cared for in the environment from which he or she
2 entered the hospital.

3 e. The hospital personnel must complete the
4 evaluation on a timely basis so that appropriate
5 arrangements for post-hospital care are made before
6 discharge, and to avoid unnecessary delays in
7 discharge.

8 f. The hospital must include the discharge planning
9 evaluation in the patient's medical record for use in
10 establishing an appropriate discharge plan and must
11 discuss the results of the evaluation with the patient
12 or individual acting on his or her behalf.

13 3. Standard: Discharge plan.

14 a. A registered nurse, social worker, or other
15 appropriately qualified personnel must develop, or
16 supervise the development of, a discharge plan if the
17 discharge planning evaluation indicates a need for a
18 discharge plan.

19 b. In the absence of a finding by the hospital
20 that a patient needs a discharge plan, the patient's
21 physician may request a discharge plan. In such a
22 case, the hospital must develop a discharge plan for
23 the patient.

24 c. The hospital must arrange for the initial
25 implementation of the patient's discharge plan.

26 d. The hospital must reassess the patient's
27 discharge plan if there are factors that may affect
28 continuing care needs or the appropriateness of the
29 discharge plan.

30 e. As needed, the patient and family members or
31 interested persons must be counseled to prepare them
32 for post-hospital care.

33 f. The hospital must include in the discharge plan
34 a list of home health agencies or skilled nursing
35 facilities that are available to the patient, that are

1 participating in the Medicare program, and that serve
2 the geographic area, as defined by the home health
3 agency, in which the patient resides, or in the case
4 of a skilled nursing facility, in the geographic area
5 requested by the patient. Home health agencies must
6 request to be listed by the hospital as available.

7 (1) This list must only be presented to patients
8 for whom home health care or post-hospital extended
9 care services are indicated and appropriate as
10 determined by the discharge planning evaluation.

11 (2) For patients enrolled in managed care
12 organizations, the hospital must indicate the
13 availability of home health and post-hospital extended
14 care services through individuals and entities that
15 have a contract with the managed care organizations.

16 (3) The hospital must document in the patient's
17 medical record that the list was presented to the
18 patient or to the individual acting on the patient's
19 behalf.

20 g. The hospital, as part of the discharge planning
21 process, must inform the patient or the patient's
22 family of their freedom to choose among participating
23 Medicare providers of post-hospital care services
24 and must, when possible, respect patient and family
25 preferences when they are expressed. The hospital must
26 not specify or otherwise limit the qualified providers
27 that are available to the patient.

28 h. The discharge plan must identify any home health
29 agency or skilled nursing facility to which the patient
30 is referred in which the hospital has a disclosable
31 financial interest, as specified by the secretary of
32 health and human services, and any home health agency
33 or skilled nursing facility that has a disclosable
34 financial interest in a hospital under Medicare.
35 Financial interests that are disclosable under Medicare

1 are determined in accordance with the provisions of 42
2 C.F.R. pt. 420, subpt. C.

3 4. Standard: Transfer or referral. The hospital
4 must transfer or refer patients, along with necessary
5 medical information, to appropriate facilities,
6 agencies, or outpatient services, as needed, for
7 follow-up or ancillary care.

8 5. Standard: Reassessment. The hospital must
9 reassess its discharge planning process on an ongoing
10 basis. The reassessment must include a review of
11 discharge plans to ensure that they are responsive to
12 discharge needs.>

13 2. By renumbering as necessary.

BYRNES of Mitchell